



## City of San Bruno - Utility Billing Division Pre-Authorized Payment Form

I authorize the **City of San Bruno** to keep my signature on file and to charge my MasterCard or Visa account as indicated below:

☒ \*Recurring Charges - Varying Amounts

\_\_\_\_\_  
Customer Name (please print)

\_\_\_\_\_  
Service Address

Utility Account # \_\_\_\_ - \_\_\_\_

\_\_\_\_\_  
*Cardholder* Name

\_\_\_\_\_  
*Cardholder* Billing Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Credit Card Account # Mo. \_\_\_\_ Yr. \_\_\_\_  
Expiration Date

\_\_\_\_\_  
*Cardholder* Signature Date

\_\_\_\_\_  
*Cardholder* daytime phone

Please return completed authorization form to:  
San Bruno Utility Billing Division  
570 Linden Avenue  
San Bruno Ca 94066  
Phone 650-616-7086

\*Customer must phone Utility Billing Division office for each payment

*Office Use Only*  
Account Number # \_\_\_\_ - \_\_\_\_  
Date Processed \_\_\_\_ Int. \_\_\_\_